



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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Bib Data Sheet

CONFIRMATION NO. 1809

<b>SERIAL NUMBER</b> 09/696,872	<b>FILING DATE</b> 10/26/2000 <b>RULE</b>	<b>CLASS</b> 530	<b>GROUP ART UNIT</b> 1652	<b>ATTORNEY DOCKET NO.</b> 11746/46603	
<b>APPLICANTS</b> James E. Rothman, New York, NY; <b>** CONTINUING DATA *****</b> THIS APPLICATION IS A DIV OF 09/124,671 07/29/1998 PAT 6,160,088 <b>** FOREIGN APPLICATIONS *****</b> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 12/20/2000</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 60	<b>TOTAL CLAIMS</b> 43	<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> DEBORAH A. SOMERVILLE KENYON AND KENYON ONE BROADWAY NEW YORK, NY 10004					
<b>TITLE</b> Kedel receptor inhibitors					
<b>FILING FEE RECEIVED</b> 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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<b>SERIAL NUMBER</b> 09/696,872	<b>FILING DATE</b> 10/26/2000 <b>RULE</b> _	<b>CLASS</b> 530	<b>GROUP ART UNIT</b> 1646	<b>ATTORNEY DOCKET NO.</b> A31488-II 0653360.0142
<b>APPLICANTS</b> James E. Rothman, New York, NY ;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A DIV OF 09/124,671 07/29/1998 PAT 6,160,088 <b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 12/20/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 60	<b>TOTAL CLAIMS</b> 43 <b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> Baker Botts LLP 30 Rockefeller Plaza 44th Floor New York ,NY 10112-4498				
<b>TITLE</b> Kedel receptor inhibitors				
<b>FILING FEE RECEIVED</b> 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	